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CONFIRMATION NO. 1251

|  |   |                               |   |   |                                |
|--|---|-------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/801,063   | <b>FILING OR 371(c) DATE</b><br>03/15/2004<br><b>RULE</b>   | <b>CLASS</b><br>514           | <b>GROUP ART UNIT</b><br>1623   | <b>ATTORNEY DOCKET NO.</b><br>1443.153US1 |                                |
| <b>APPLICANTS</b><br>Shu-Ping Yang, Alpharetta, GA;<br>Yanbin Huang, Roswell, GA;  |   |                               |   |   |                                |
| <b>** CONTINUING DATA *****</b><br><i>none/LCM</i>   |   |                               |   |   |                                |
| <b>** FOREIGN APPLICATIONS *****</b><br><i>none/LCM</i>  |   |                               |   |   |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>05/31/2004  |   |                               |   |   |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met <input type="checkbox"/> Allowance<br>Verified and <i>Leigh C. Meier LCM</i><br>Acknowledged Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>GA | <b>SHEETS DRAWING</b><br>2  | <b>TOTAL CLAIMS</b><br>21                 | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>21186  |   |                               |   |   |                                |
| <b>TITLE</b><br>Compositions for vaginal treatment   |   |                               |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>918  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |